

DISCIPLINARY COMMISSION OF THE INDIANA SUPREME COURT

**CERTIFICATE THAT NO DISCIPLINARY ACTION IS PENDING
AGAINST ANY OF THE OFFICERS, DIRECTORS, SHAREHOLDERS,
MEMBERS, PARTNERS, OTHER EQUITY OWNERS, OR LAWYER EMPLOYEES OF**

NAME OF PROFESSIONAL CORPORATION, LIMITED LIABILITY COMPANY OR
LIMITED LIABILITY PARTNERSHIP

Name

Address and Zip Code

I, the undersigned, Executive Secretary of the Disciplinary Commission of Indiana, do hereby certify that no disciplinary action is pending against any of the officers, directors, shareholders, members, partners, other equity owners, or lawyer employees required to be licensed in Indiana of the above-named Professional Corporation, Limited Liability Company or Limited Liability Partnership whose names are as follows:

LISTING OF OFFICERS, DIRECTORS, SHAREHOLDERS, MEMBERS, PARTNERS,
OTHER EQUITY OWNERS, AND LAWYER EMPLOYEES:

*****A listing of each applicable category should be attached to this Certification. A sample is enclosed to demonstrate the format for this listing. Non-Indiana attorneys should not be listed.*****

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____,
2_____.

Executive Secretary of the Disciplinary
Commission of the Supreme Court of Indiana

CLERK OF THE INDIANA SUPREME COURT

**CERTIFICATE THAT ALL OFFICERS, DIRECTORS, SHAREHOLDERS,
MEMBERS, PARTNERS, OTHER EQUITY OWNERS, OR LAWYER EMPLOYEES
ARE LICENSED TO PRACTICE LAW IN THE STATE OF INDIANA**

NAME OF PROFESSIONAL CORPORATION, LIMITED LIABILITY COMPANY OR
LIMITED LIABILITY PARTNERSHIP

Name

Address and Zip Code

I, the undersigned, Clerk of the Supreme Court of Indiana, do hereby certify that the following officers, directors, shareholders, members, partners, other equity owners, or lawyer employees required to be licensed in Indiana of the above-named Professional Corporation, Limited Liability Company or Limited Liability Partnership are each licensed to practice law in Indiana:

LISTING OF OFFICERS, DIRECTORS, SHAREHOLDERS, MEMBERS, PARTNERS,
OTHER EQUITY OWNERS, AND LAWYER EMPLOYEES:

*****A listing of each applicable category should be attached to this Certification. A sample is enclosed to demonstrate the format for this listing. Non-Indiana attorneys should not be listed.*****

IN WITNESS WHEREOF, I have hereunto set my hand this _____ day of _____,
2_____.

Clerk of the Supreme Court of Indiana

(\$1.00 fee for each name certified)